

HARNES, DICKEY & PIERCE, P.L.C.

Attorneys and Counselors
7700 Bonhomme, Suite 400
Clayton, MO 63105
Phone: 314-726-7500
Fax: 314-726-7501
Troy, MI • Washington, D.C.

DATE: August 28, 2006

NO. OF PAGES (INCLUDING THIS PAGE): 1

| | |
|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FOR: Manuel Saldana | ORIGINAL WILL FOLLOW BY: <input type="checkbox"/> REGULAR MAIL <input type="checkbox"/> OVERNIGHT MAIL <input type="checkbox"/> COURIER <input checked="" type="checkbox"/> WILL NOT FOLLOW |
| COMPANY: USPTO | |
| FAX NO.: 571-273-9900 PHONE: | |

FROM: Kelly Burris

Please let us know by phone or fax if you do not receive any of these pages.

COMMENTS:

Please see attached change in power of attorney and statement under 37 C.F.R. 3.73(b) previously filed on May 19, 2006.

Thank you,
Kelly Burris

Control No.: 90/008,040

***** NOTICE *****

The information contained in this telefax transmission is intended only for the individual to whom or entity to which it is addressed. It may also contain privileged, confidential, attorney work product or trade secret information which is protected by law. If the reader of this message is not the intended recipient, or an employee or agent responsible for delivering the message to the addressee, the reader is hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the address above via the U.S. Postal Service. We will reimburse you for any reasonable expense (including postage) for the return of the original message.

PTO/6821 (09-04)
 Approved for use through 07/31/2006. OMB 051-0051
 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|----------------------------------------------------------|----------------------|------------------------|-----------------------------|
| TRANSMITTAL FORM | Application Number | 07325,890 | |
| | Filing Date | 03/20/1999 | |
| | First Named Inventor | Arthur Q. Volbrecht | |
| | Patent Number | 4,934,831 | |
| | Issue Date | 06/19/1990 | |
| (to be used for all correspondence after initial filing) | | | |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number | 7377S-000026/US (CSGCC0100) |

| ENCLOSURES (check all that apply) | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply. <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Answer Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b) (1 page). |
| Remarks: | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--------------------------------------------|------------------------------|----------|--------|
| Firm | Hamm, Olsky & Pierce, P.L.C. | | |
| Signature | <i>Kelly K. Burris</i> | | |
| Printed Name | Kelly K. Burris | | |
| Date | May 16, 2006 | Reg. No. | 45,361 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------|-----------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO (571-273-8300) to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Typed or printed name | Kelly K. Burris | Express Mail Label No. | |
| Signature | <i>Kelly K. Burris</i> | Date | 19 MAY 06 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.71 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-6122 and select option 2.

05/18/2006 23:30 FAX

WATLOW HEATER TECHNOLOGY

002

PTO/SB/62 (01-03)
Approved for use through 12/31/2008. OMB 0631-0036
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|--------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------|
| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 07/326,690 |
| | Filing Date | 03/20/1989 |
| | First Named Inventor | Arthur O. Volbrecht |
| | Patent Number | 4,934,891 |
| | Issue Date | 06/19/1990 |
| Attorney Docket Number | | 73775-00026/US(CSGC00100) |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28997

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with Customer Number

28997

OR

☐ Firm or Individual Name

Harness, Dickey & Pierce, P.L.C.

Address

7700 Bonhomme Avenue
Suite 400

City

St. Louis

State Missouri

Zip 63105

Country

U.S.A.

Telephone

(314) 728-7500

Email kbturner@hdp.com

I am the:

☐ Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

☒ Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature

Louis P. Steinhauser, V.P., Chief Technology Officer

Name

Watlow Electric Manufacturing Company

Date

May 19, 2006

Telephone (636) 349-5123

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form in the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22318-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22318-1460.

If you need assistance in completing this form, call 1-800-PTO-0399 (1-800-726-9199) and select option 2.

03/19/2000 23:29 FAX

WATLOW HEATER TECHNOLOGY

001

PTO/BB/PO (12-05)

Approved for use through 07-31-2006, PMS 0531-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Watlow Electric Manufacturing CompanyApplication No./Patent No./Control No.: 4,934,831Filing Date: 08/19/1990

Entitled:

TEMPERATURE SENSING DEVICE

Watlow Electric Manufacturing Company

a corporation

(Name of Assignee)

(Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest
(The extent (by percentage) of its ownership interest is _____ %)

In the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel Q16768, Frame 0881.

OR

- B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Louis P. Steinhilber
Signature

Louis P. Steinhilber

Printed or Typed Name

V.P., Chief Technology Officer

Title

May 19, 2006
Date

(836) 349-5123

Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed response form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing this form, call 1-800-PTO-0199 and select option 2.